

Declaration For Patent Application

JS  
20120502

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below to my name,  
I believe I am the original, first and sole inventor (if only one name is listed below) or  
an original, first and joint inventor (if plural names are listed below) of the subject  
matter which is claimed and for which a patent is sought on the invention entitled  
Method for checking the use of a system for transmitting information, the specification  
of which submitted in the form of matrix codes

(X) is attached hereto.

( ) was filed on \_\_\_\_\_ as Application No. \_\_\_\_\_  
and was amended on \_\_\_\_\_ (if applicable)

( ) was filed under the Patent Cooperation Treaty on \_\_\_\_\_  
Serial No. \_\_\_\_\_, the United States of America  
being designated.

I hereby state that I have reviewed and understand the contents of the above identified  
specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of  
this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any  
foreign application(s) for patent or inventor's certificate listed below and have also  
identified below any foreign application for patent or inventor's certificate having a  
filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)			Priority Claimed	
<u>00 15458</u> (Number)	<u>FRANCE</u> (Country)	<u>24/11/2000</u> (Day/Month/Year Filed)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States  
application(s) listed below and, insofar as the subject matter of each of the claims of  
this application is not disclosed in the prior United States application in the manner  
provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the  
duty to disclose material information as defined in Title 37, Code of Federal Regulations,  
§1.56(a) which occurred between the filing date of the prior application and the national  
or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
_____ (Application Serial No.)	_____ (Filing Date)	_____ (Status) (patented, pending, abandoned)

I hereby appoint William A. Drucker, 1299 Pennsylvania Ave., N.W. Washington D.C. 20004  
Reg. No. 17,951 and telephone (202) 639-7713 as my attorney to prosecute this application  
and to transact all business in the Patent and Trademark Office connected therewith.

I hereby declare that all statements made herein of my own knowledge are true and that all  
statements made on information and belief are believed to be true; and further that these  
statements were made with the knowledge that willful false statements and the like so made  
are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the  
United States Code and that such willful false statements may jeopardize the validity of  
the application or any patent issued thereon.

Full name of sole or first inventor CLAVIEZ-HOMBERG Patrice  
Inventor's signature [Signature] Date 26/12/2000

Residence 30 Rue des Romains - 92270 BOIS-COLOMBES - FRANCE  
Citizenship FRENCH  
Post Office Address 30 rue des Romains - 92270 BOIS COLOMBES - FRANCE

Full name of second joint inventor, if any \_\_\_\_\_  
Second Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_  
Citizenship \_\_\_\_\_  
Post Office Address \_\_\_\_\_

(Supply similar information and signature for third and subsequent joint inventors.)

Patent CLAVIEZ-HOMBERG

Applicant or Patentee: \_\_\_\_\_ Attorney's  
Serial or Patent No.: \_\_\_\_\_ Docket No.: \_\_\_\_\_

Filed or issued: herewith  
For: Method for checking the use of a system for transmitting information submitted in  
the form of matrix codes

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY  
STATUS (37 CFR 1.9 (f) and 1.27 (c)) — SMALL BUSINESS CONCERN

I hereby declare that I am

- ☐ the owner of the small business concern identified below:  
☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN OPTIMA DIRECT

ADDRESS OF CONCERN ZAC De la Pointe à l'Abbé - 10 rue Marie Curie-  
91700 VILLIERS SUR ORGE - FRANCE

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9 (d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled Method for checking the use of a system for  
transmitting information submitted in the form of matrix codes by inventor(s)  
Patrice CLAVIEZ-HOMBERG described in

☒ the specification filed herewith

☐ application serial no. \_\_\_\_\_, filed \_\_\_\_\_  
☐ patent no. \_\_\_\_\_, issued \_\_\_\_\_

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below\* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9 (d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9 (d) or a nonprofit organization under 37 CFR 1.9 (e).

\*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28 (b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING Patrice Claviez-Homberg  
TITLE OF PERSON OTHER THAN OWNER General Manager  
ADDRESS OF PERSON SIGNING 30 Rue des Romains 91270

SIGNATURE

P. Claviez-Homberg

DATE 20-12-2000